Complete Summary

TITLE

Management of initial abnormal Pap smear: percentage of women diagnosed with an initial abnormal Pap smear of atypical squamous cells of undetermined significance (ASC-US) with high-risk human papillomavirus (HPV) type who have follow-up colposcopy within six months of abnormality identified.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Management of initial abnormal Pap smear. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2005 Oct. 28 p. [56 references]

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the Measure Validity page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess percentage of women diagnosed with an initial abnormal Pap smear of atypical squamous cells of undetermined significance (ASC-US) with high-risk human papillomavirus (HPV) type who have follow-up colposcopy within six months of abnormality identified.

RATIONALE

The priority aim addressed by this measure is that all women who undergo cervical cytologic analysis and receive an abnormal Pap result will receive appropriate clinical follow-up.

PRIMARY CLINICAL COMPONENT

Cervical cytology; Papanicolaou (Pap) smear; atypical squamous cells of undetermined significance (ASC-US) with high-risk human papillomavirus (HPV) type; colposcopy

DENOMINATOR DESCRIPTION

Number of women with an initial abnormal Pap smear of atypical squamous cells of undetermined significance (ASC-US) with high-risk human papillomavirus (HPV) type identified by International Classification of Diseases, Ninth Revision (ICD-9) code 795.05

NUMERATOR DESCRIPTION

Number of women with follow-up colposcopy within six months (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

NATIONAL GUIDELINE CLEARINGHOUSE LINK

- Management of initial abnormal Pap smear.

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Unspecified

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Group Clinical Practices

TARGET POPULATION AGE

Unspecified

TARGET POPULATION GENDER

Female (only)

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Getting Better
Staying Healthy

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Women with an initial abnormal Pap smear result of atypical squamous cells of undetermined significance (ASC-US) with high-risk human papillomavirus (HPV) type isolated

Identify women with abnormal Pap smear results of ASC-US with high-risk HPV type by International Classification of Diseases, Ninth Revision (ICD-9) code. If you are doing this measure quarterly, select a three-month target period that is 6 to 9 months prior. For example, if this measure is to be collected in June, select a target period of October through December of the previous year.

The suggested time frame for data collection is quarterly.

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions
Number of women with an initial abnormal Pap smear of atypical squamous cells of undetermined significance (ASC-US) with high-risk human papillomavirus (HPV) type identified by International Classification of Diseases, Ninth Revision (ICD-9) code 795.05

Exclusions
Unspecified

DENOMINATOR (INDEX) EVENT

Clinical Condition

DENOMINATOR TIME WINDOW

Time window precedes index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions
Number of women with follow-up colposcopy within six months*

*Women identified in the denominator who have had an encounter with a Current Procedure Terminology (CPT) code of 57452, 57454, 57455, 57456, 57460, 57461 within six months of initial abnormal Pap results.

Review the visit data for the women identified in the target period for clinical follow-up using the CPT codes listed. Many medical groups will have access for this data through their clinical data systems and access the CPT codes through their administrative data system.

For those women who have not received a follow-up colposcopy, a chart audit can be performed to determine if care was received from an outside provider. Documentation of follow-up in the chart will be considered meeting the criteria of the measure.

Exclusions
Unspecified

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data
Laboratory data
Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Percentage of women diagnosed with an initial abnormal Pap smear of ASC-US with high-risk HPV type who have follow-up colposcopy within six months of abnormality identified.

MEASURE COLLECTION

Management of Initial Abnormal Pap Smear Measures

DEVELOPER

Institute for Clinical Systems Improvement

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2003 Apr

REVISION DATE

2005 Oct

MEASURE STATUS

This is the current release of the measure.

This measure updates a previous version: Institute for Clinical Systems Improvement (ICSI). Management of initial abnormal Pap smear. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2004 Jul. 45 p.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Management of initial abnormal Pap smear. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2005 Oct. 28 p. [56 references]

MEASURE AVAILABILITY

The individual measure, "Percentage of women diagnosed with an initial abnormal Pap smear of ASC-US with high-risk HPV type who have follow-up colposcopy within six months of abnormality identified," is published in "Health Care Guideline: Management of Initial Abnormal Pap Smear." This document is available from the Institute for Clinical Systems Improvement (ICSI) Web site.

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: www.icsi.org; e-mail: icsi.info@icsi.org.

NQMC STATUS

This NQMC summary was completed by ECRI on February 9, 2004. This summary was updated by ECRI on October 11, 2004 and again on November 16, 2005.

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